County: Outagamie GOOD SHEPHERD HOME

607	BRONSON	ROAD
007	DICOMBOIL	ICOAD

SEYMOUR 54165 Phone: (920) 833-6856	5	Ownership:	Nonprofit Church/Corporation
Operated from 1/1 To 12/31 Days of Operation:	365	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/05):	95	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/05):	95	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/05:	90	Average Daily Census:	90

Age, Gender, and Primary Diagnosis	Length of Stay (12/31/05)	8			
Primary Diagnosis	8	Age Groups 	*	   Less Than 1 Year   1 - 4 Years	22.2 48.9
Developmental Disabilities	0.0	Under 65	4.4	More Than 4 Years	28.9
Mental Illness (Org./Psy)	42.2	65 - 74	6.7		
Mental Illness (Other)	2.2	75 - 84	31.1		100.0
Alcohol & Other Drug Abuse	0.0	85 - 94	47.8		
Para-, Quadra-, Hemiplegic	0.0	95 & Over	10.0	Full-Time Equivalent	
Cancer	5.6			Nursing Staff per 100 Resid	lents
Fractures	3.3	İ	100.0	(12/31/05)	
Cardiovascular	7.8	65 & Over	95.6		
Cerebrovascular	27.8			RNs	11.8
Diabetes	0.0	Gender	%	LPNs	10.9
Respiratory	3.3			Nursing Assistants,	
Other Medical Conditions	7.8	Male	21.1	Aides, & Orderlies	58.6
		Female	78.9	İ	
	100.0	j		j	
		İ	100.0	İ	

## Method of Reimbursement

		Medicare 'itle 18			edicaid itle 19			Other		Ī	Private Pay	2		amily Care			Managed Care			
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	3	60.0	408	4	6.1	144	0	0.0	0	3	16.7	179	0	0.0	0	1	100.0	144	11	12.2
Skilled Care	2	40.0	316	60	90.9	123	0	0.0	0	15	83.3	179	0	0.0	0	0	0.0	0	77	85.6
Intermediate				2	3.0	103	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	2.2
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	5	100.0		66	100.0		0	0.0		18	100.0		0	0.0		1	100.0		90	100.0

GOOD SHEPHERD HOME

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/05
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	8	As	ssistance of	% Totally	Number of
Private Home/No Home Health	10.3	Daily Living (ADL)	Independent	One	e Or Two Staff	Dependent	Residents
Private Home/With Home Health	5.1	Bathing	0.0		92.2	7.8	90
Other Nursing Homes	2.6	Dressing	7.8		86.7	5.6	90
Acute Care Hospitals	78.2	Transferring	12.2		82.2	5.6	90
Psych. HospMR/DD Facilities	0.0	Toilet Use	13.3		82.2	4.4	90
Rehabilitation Hospitals	0.0	Eating	10.0		80.0	10.0	90
Other Locations	0.0	*******	******	*****	*******	*******	*****
Total Number of Admissions	78	Continence		%	Special Treatmen	ts	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	6.7	Receiving Resp	iratory Care	6.7
Private Home/No Home Health	36.6	Occ/Freq. Incontiner	nt of Bladder	73.3	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	19.5	Occ/Freq. Incontiner	nt of Bowel	40.0	Receiving Suct	ioning	1.1
Other Nursing Homes	1.2	į			Receiving Osto	my Care	1.1
Acute Care Hospitals	2.4	Mobility			Receiving Tube	_	2.2
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	0.0	Receiving Mech	anically Altered Diets	8.9
Rehabilitation Hospitals	0.0	į -				-	
Other Locations	0.0	Skin Care			Other Resident C	haracteristics	
Deaths	37.8	With Pressure Sores		5.6	Have Advance D	irectives	86.7
Total Number of Discharges		With Rashes		7.8	Medications		
(Including Deaths)	82				Receiving Psvo	hoactive Drugs	54.4

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

***************	*****	****	*****	*****	*****	*****	*****	*****	*****
		Owne	ership:	Bed	Size:	Lic	ensure:		
	This	This Nonprofi			-99	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	%	%	Ratio	ઇ	Ratio	%	Ratio	ે	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	94.7	93.4	1.01	86.3	1.10	88.8	1.07	88.1	1.08
	76.7			80.0	0.96	83.2	0.92	77.6	0.99
Current Residents from In-County		85.9	0.89						
Admissions from In-County, Still Residing	19.2	20.9	0.92	18.8	1.02	18.7	1.03	18.1	1.06
Admissions/Average Daily Census	86.7	162.7	0.53	180.5	0.48	177.7	0.49	162.3	0.53
Discharges/Average Daily Census	91.1	162.0	0.56	178.7	0.51	179.2	0.51	165.1	0.55
Discharges To Private Residence/Average Daily Census	51.1	81.3	0.63	87.1	0.59	83.4	0.61	74.8	0.68
Residents Receiving Skilled Care	97.8	97.5	1.00	96.4	1.01	96.3	1.02	92.1	1.06
Residents Aged 65 and Older	95.6	96.3	0.99	93.5	1.02	91.3	1.05	88.4	1.08
Title 19 (Medicaid) Funded Residents	73.3	54.2	1.35	59.0	1.24	61.8	1.19	65.3	1.12
Private Pay Funded Residents	20.0	31.8	0.63	24.5	0.82	22.5	0.89	20.2	0.99
Developmentally Disabled Residents	0.0	0.5	0.00	0.8	0.00	1.1	0.00	5.0	0.00
Mentally Ill Residents	44.4	33.9	1.31	31.6	1.41	34.8	1.28	32.9	1.35
General Medical Service Residents	7.8	25.2	0.31	26.1	0.30	23.0	0.34	22.8	0.34
Impaired ADL (Mean)	49.1	49.3	1.00	47.8	1.03	48.4	1.01	49.2	1.00
Psychological Problems	54.4	57.5	0.95	57.6	0.95	59.5	0.92	58.5	0.93
Nursing Care Required (Mean)	4.2	6.9	0.61	7.0	0.60	7.2	0.58	7.4	0.56